

AMENDED IN SENATE AUGUST 26, 2013

AMENDED IN SENATE JULY 8, 2013

AMENDED IN ASSEMBLY APRIL 23, 2013

AMENDED IN ASSEMBLY MARCH 21, 2013

CALIFORNIA LEGISLATURE—2013–14 REGULAR SESSION

## ASSEMBLY BILL

**No. 1008**

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**Introduced by Assembly Member Buchanan**

February 22, 2013

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An act to amend Section 101850 of the Health and Safety Code, relating to health care.

### LEGISLATIVE COUNSEL'S DIGEST

AB 1008, as amended, Buchanan. Alameda County Medical Center: privatization of services.

Existing law authorizes the board of supervisors of Alameda County to establish an independent hospital authority strictly and exclusively dedicated to the management, administration, and control of the Alameda Medical Center, and sets forth the powers and duties of the hospital authority, including, but not limited to, the power to contract for services required to meet its obligations.

This bill would prohibit the hospital authority from ~~privatizing any work performed as of March 31, 2013, by physicians and surgeons employed by the authority~~ *entering into any contract with any private person or entity before January 1, 2024, to replace services being provided by physicians and surgeons who are employed by the hospital authority and in a recognized collective bargaining unit as of March 31, 2013, with services provided by a private person or entity without*

clear and convincing evidence that the needed medical care can only be delivered cost-effectively by a private contractor. The bill would require that the authority, prior to ~~privatization of~~ *entering into a contract for* any of those services, negotiate with the representative of *the recognized collective bargaining unit* of its physician and surgeon employees over the decision to privatize, and would require unresolved disputes to be submitted to final binding arbitration.

This bill would make legislative findings and declarations as to the necessity of a special statute for resolving the unique needs faced by the county with respect to the operation and administration of the medical center.

Vote: majority. Appropriation: no. Fiscal committee: no.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1     SECTION 1. Section 101850 of the Health and Safety Code  
2     is amended to read:  
3     101850. The Legislature finds and declares the following:  
4     (a) (1) Due to the challenges facing the Alameda County  
5     Medical Center arising from changes in the public and private  
6     health industries, the Alameda County Board of Supervisors has  
7     determined that a transfer of governance of the Alameda County  
8     Medical Center to an independent governing body, a hospital  
9     authority, is needed to improve the efficiency, effectiveness, and  
10    economy of the community health services provided at the medical  
11    center. The board of supervisors has further determined that the  
12    creation of an independent hospital authority strictly and  
13    exclusively dedicated to the management, administration, and  
14    control of the medical center, in a manner consistent with the  
15    county's obligations under Section 17000 of the Welfare and  
16    Institutions Code, is the best way to fulfill its commitment to the  
17    medically indigent, special needs, and general populations of  
18    Alameda County. To accomplish this, it is necessary that the board  
19    of supervisors be given authority to create a hospital authority.  
20    Because there is no general law under which this authority could  
21    be formed, the adoption of a special act and the formation of a  
22    special authority is required.  
23    (2) The following definitions shall apply for purposes of this  
24    section:

1 (A) “The county” means the County of Alameda.

2 (B) “Governing board” means the governing body of the hospital  
3 authority.

4 (C) “Hospital authority” means the separate public agency  
5 established by the Board of Supervisors of Alameda County to  
6 manage, administer, and control the Alameda County Medical  
7 Center.

8 (D) “Medical center” means the Alameda County Medical  
9 Center.

10 (b) The board of supervisors of the county may, by ordinance,  
11 establish a hospital authority separate and apart from the county  
12 for the purpose of effecting a transfer of the management,  
13 administration, and control of the medical center in accordance  
14 with Section 14000.2 of the Welfare and Institutions Code. A  
15 hospital authority established pursuant to this chapter shall be  
16 strictly and exclusively dedicated to the management,  
17 administration, and control of the medical center within parameters  
18 set forth in this chapter, and in the ordinance, bylaws, and contracts  
19 adopted by the board of supervisors which shall not be in conflict  
20 with this chapter, Section 1442.5 of this code, or Section 17000  
21 of the Welfare and Institutions Code.

22 (c) A hospital authority established pursuant to this chapter shall  
23 be governed by a board that is appointed, both initially and  
24 continually, by the Board of Supervisors of the County of Alameda.  
25 This hospital authority governing board shall reflect both the  
26 expertise necessary to maximize the quality and scope of care at  
27 the medical center in a fiscally responsible manner and the diverse  
28 interest that the medical center serves. The enabling ordinance  
29 shall specify the membership of the hospital authority governing  
30 board, the qualifications for individual members, the manner of  
31 appointment, selection, or removal of governing board members,  
32 their terms of office, and all other matters that the board of  
33 supervisors deems necessary or convenient for the conduct of the  
34 hospital authority’s activities.

35 (d) The mission of the hospital authority shall be the  
36 management, administration, and other control, as determined by  
37 the board of supervisors, of the group of public hospitals, clinics,  
38 and programs that comprise the medical center, in a manner that  
39 ensures appropriate, quality, and cost-effective medical care as  
40 required of counties by Section 17000 of the Welfare and

1 Institutions Code, and, to the extent feasible, other populations,  
2 including special populations in Alameda County.

3 (e) The board of supervisors shall adopt bylaws for the medical  
4 center that set forth those matters related to the operation of the  
5 medical center by the hospital authority that the board of  
6 supervisors deems necessary and appropriate. The bylaws shall  
7 become operative upon approval by a majority vote of the board  
8 of supervisors. Any changes or amendments to the bylaws shall  
9 be by majority vote of the board of supervisors.

10 (f) The hospital authority created and appointed pursuant to this  
11 section is a duly constituted governing body within the meaning  
12 of Section 1250 and Section 70035 of Title 22 of the California  
13 Code of Regulations as currently written or subsequently amended.

14 (g) Unless otherwise provided by the board of supervisors by  
15 way of resolution, the hospital authority is empowered, or the  
16 board of supervisors is empowered on behalf of the hospital  
17 authority, to apply as a public agency for one or more licenses for  
18 the provision of health care pursuant to statutes and regulations  
19 governing licensing as currently written or subsequently amended.

20 (h) In the event of a change of license ownership, the governing  
21 body of the hospital authority shall comply with the obligations  
22 of governing bodies of general acute care hospitals generally as  
23 set forth in Section 70701 of Title 22 of the California Code of  
24 Regulations, as currently written or subsequently amended, as well  
25 as the terms and conditions of the license. The hospital authority  
26 shall be the responsible party with respect to compliance with these  
27 obligations, terms, and conditions.

28 (i) (1) Any transfer by the county to the hospital authority of  
29 the administration, management, and control of the medical center,  
30 whether or not the transfer includes the surrendering by the county  
31 of the existing general acute care hospital license and corresponding  
32 application for a change of ownership of the license, shall not  
33 affect the eligibility of the county, or in the case of a change of  
34 license ownership, the hospital authority, to do any of the  
35 following:

36 (A) Participate in, and receive allocations pursuant to, the  
37 California Healthcare for the Indigent Program (CHIP).

38 (B) Receive supplemental reimbursements from the Emergency  
39 Services and Supplemental Payments Fund created pursuant to  
40 Section 14085.6 of the Welfare and Institutions Code.

1 (C) Receive appropriations from the Medi-Cal Inpatient Payment  
2 Adjustment Fund without relieving the county of its obligation to  
3 make intergovernmental transfer payments related to the Medi-Cal  
4 Inpatient Payment Adjustment Fund pursuant to Section 14163 of  
5 the Welfare and Institutions Code.

6 (D) Receive Medi-Cal capital supplements pursuant to Section  
7 14085.5 of the Welfare and Institutions Code.

8 (E) Receive any other funds that would otherwise be available  
9 to a county hospital.

10 (2) Any transfer described in paragraph (1) shall not otherwise  
11 disqualify the county, or in the case of a change in license  
12 ownership, the hospital authority, from participating in any of the  
13 following:

14 (A) Other funding sources either specific to county hospitals or  
15 county ambulatory care clinics or for which there are special  
16 provisions specific to county hospitals or to county ambulatory  
17 care clinics.

18 (B) Funding programs in which the county, on behalf of the  
19 medical center and the Alameda County Health Care Services  
20 Agency, had participated prior to the creation of the hospital  
21 authority, or would otherwise be qualified to participate in had the  
22 hospital authority not been created, and administration,  
23 management, and control not been transferred by the county to the  
24 hospital authority, pursuant to this chapter.

25 (j) A hospital authority created pursuant to this chapter shall be  
26 a legal entity separate and apart from the county and shall file the  
27 statement required by Section 53051 of the Government Code.  
28 The hospital authority shall be a government entity separate and  
29 apart from the county, and shall not be considered to be an agency,  
30 division, or department of the county. The hospital authority shall  
31 not be governed by, nor be subject to, the charter of the county  
32 and shall not be subject to policies or operational rules of the  
33 county, including, but not limited to, those relating to personnel  
34 and procurement.

35 (k) (1) Any contract executed by and between the county and  
36 the hospital authority shall provide that liabilities or obligations  
37 of the hospital authority with respect to its activities pursuant to  
38 the contract shall be the liabilities or obligations of the hospital  
39 authority, and shall not become the liabilities or obligations of the  
40 county.

1 (2) Any liabilities or obligations of the hospital authority with  
2 respect to the liquidation or disposition of the hospital authority's  
3 assets upon termination of the hospital authority shall not become  
4 the liabilities or obligations of the county.

5 (3) Any obligation of the hospital authority, statutory,  
6 contractual, or otherwise, shall be the obligation solely of the  
7 hospital authority and shall not be the obligation of the county or  
8 the state.

9 (l) (1) Notwithstanding any other provision of this section, any  
10 transfer of the administration, management, or assets of the medical  
11 center, whether or not accompanied by a change in licensing, shall  
12 not relieve the county of the ultimate responsibility for indigent  
13 care pursuant to Section 17000 of the Welfare and Institutions  
14 Code or any obligation pursuant to Section 1442.5 of this code.

15 (2) Any contract executed by and between the county and the  
16 hospital authority shall provide for the indemnification of the  
17 county by the hospital authority for liabilities as specifically set  
18 forth in the contract, except that the contract shall include a  
19 provision that the county shall remain liable for its own negligent  
20 acts.

21 (3) Indemnification by the hospital authority shall not be  
22 construed as divesting the county from its ultimate responsibility  
23 for compliance with Section 17000 of the Welfare and Institutions  
24 Code.

25 (m) Notwithstanding the provisions of this section relating to  
26 the obligations and liabilities of the hospital authority, a transfer  
27 of control or ownership of the medical center shall confer onto the  
28 hospital authority all the rights and duties set forth in state law  
29 with respect to hospitals owned or operated by a county.

30 (n) (1) A transfer of the maintenance, operation, and  
31 management or ownership of the medical center to the hospital  
32 authority shall comply with the provisions of Section 14000.2 of  
33 the Welfare and Institutions Code.

34 (2) A transfer of maintenance, operation, and management or  
35 ownership to the hospital authority may be made with or without  
36 the payment of a purchase price by the hospital authority and  
37 otherwise upon the terms and conditions that the parties may  
38 mutually agree, which terms and conditions shall include those  
39 found necessary by the board of supervisors to ensure that the

1 transfer will constitute an ongoing material benefit to the county  
2 and its residents.

3 (3) A transfer of the maintenance, operation, and management  
4 to the hospital authority shall not be construed as empowering the  
5 hospital authority to transfer any ownership interest of the county  
6 in the medical center except as otherwise approved by the board  
7 of supervisors.

8 (o) The board of supervisors shall retain control over the use of  
9 the medical center physical plant and facilities except as otherwise  
10 specifically provided for in lawful agreements entered into by the  
11 board of supervisors. Any lease agreement or other agreement  
12 between the county and the hospital authority shall provide that  
13 county premises shall not be sublet without the approval of the  
14 board of supervisors.

15 (p) The statutory authority of a board of supervisors to prescribe  
16 rules that authorize a county hospital to integrate its services with  
17 those of other hospitals into a system of community service that  
18 offers free choice of hospitals to those requiring hospital care, as  
19 set forth in Section 14000.2 of the Welfare and Institutions Code,  
20 shall apply to the hospital authority upon a transfer of maintenance,  
21 operation, and management or ownership of the medical center by  
22 the county to the hospital authority.

23 (q) The hospital authority shall have the power to acquire and  
24 possess real or personal property and may dispose of real or  
25 personal property other than that owned by the county, as may be  
26 necessary for the performance of its functions. The hospital  
27 authority shall have the power to sue or be sued, to employ  
28 personnel, and to contract for services required to meet its  
29 obligations. ~~The Before January 1, 2024, the hospital authority~~  
30 ~~shall not privatize any work performed enter into a contract with~~  
31 ~~any private person or entity to replace services being provided by~~  
32 ~~physicians and surgeons who are employed by the hospital~~  
33 ~~authority and in a recognized collective bargaining unit as of~~  
34 ~~March 31, 2013, by physicians and surgeons employed by the~~  
35 ~~authority with services provided by a private person or entity~~  
36 without clear and convincing evidence that the needed medical  
37 care can only be delivered cost-effectively by a private contractor.  
38 Prior to ~~privatization of entering into a contract for~~ any of those  
39 services, the authority shall negotiate with the representative of  
40 the recognized collective bargaining unit of its physician and

1 surgeon employees over the decision to privatize and, if unable to  
2 resolve any dispute through negotiations, shall submit the matter  
3 to final binding arbitration.

4 (r) Any agreement between the county and the hospital authority  
5 shall provide that all existing services provided by the medical  
6 center shall continue to be provided to the county through the  
7 medical center subject to the policy of the county and consistent  
8 with the county's obligations under Section 17000 of the Welfare  
9 and Institutions Code.

10 (s) A hospital authority to which the maintenance, operation,  
11 and management or ownership of the medical center is transferred  
12 shall be a "district" within the meaning set forth in the County  
13 Employees Retirement Law of 1937 (Chapter 3 (commencing with  
14 Section 31450) of Part 3 of Division 4 of Title 3 of the Government  
15 Code). Employees of a hospital authority are eligible to participate  
16 in the County Employees Retirement System to the extent  
17 permitted by law.

18 (t) Members of the governing board of the hospital authority  
19 shall not be vicariously liable for injuries caused by the act or  
20 omission of the hospital authority to the extent that protection  
21 applies to members of governing boards of local public entities  
22 generally under Section 820.9 of the Government Code.

23 (u) The hospital authority shall be a public agency subject to  
24 the Myers-Milias-Brown Act (Chapter 10 (commencing with  
25 Section 3500) of Division 4 of Title 1 of the Government Code).

26 (v) Any transfer of functions from county employee  
27 classifications to a hospital authority established pursuant to this  
28 section shall result in the recognition by the hospital authority of  
29 the employee organization that represented the classifications  
30 performing those functions at the time of the transfer.

31 (w) (1) In exercising its powers to employ personnel, as set  
32 forth in subdivision (p), the hospital authority shall implement,  
33 and the board of supervisors shall adopt, a personnel transition  
34 plan. The personnel transition plan shall require all of the  
35 following:

36 (A) Ongoing communications to employees and recognized  
37 employee organizations regarding the impact of the transition on  
38 existing medical center employees and employee classifications.

39 (B) Meeting and conferring on all of the following issues:



1 (i) The timeframe for which the transfer of personnel shall occur.  
2 The timeframe shall be subject to modification by the board of  
3 supervisors as appropriate, but in no event shall it exceed one year  
4 from the effective date of transfer of governance from the board  
5 of supervisors to the hospital authority.

6 (ii) A specified period of time during which employees of the  
7 county impacted by the transfer of governance may elect to be  
8 appointed to vacant positions with the Alameda County Health  
9 Care Services Agency for which they have tenure.

10 (iii) A specified period of time during which employees of the  
11 county impacted by the transfer of governance may elect to be  
12 considered for reinstatement into positions with the county for  
13 which they are qualified and eligible.

14 (iv) Compensation for vacation leave and compensatory leave  
15 accrued while employed with the county in a manner that grants  
16 affected employees the option of either transferring balances or  
17 receiving compensation to the degree permitted employees laid  
18 off from service with the county.

19 (v) A transfer of sick leave accrued while employed with the  
20 county to hospital authority employment.

21 (vi) The recognition by the hospital authority of service with  
22 the county in determining the rate at which vacation accrues.

23 (vii) The possible preservation of seniority, pensions, health  
24 benefits, and other applicable accrued benefits of employees of  
25 the county impacted by the transfer of governance.

26 (2) Nothing in this subdivision shall be construed as prohibiting  
27 the hospital authority from determining the number of employees,  
28 the number of full-time equivalent positions, the job descriptions,  
29 and the nature and extent of classified employment positions.

30 (3) Employees of the hospital authority are public employees  
31 for purposes of Division 3.6 (commencing with Section 810) of  
32 Title 1 of the Government Code relating to claims and actions  
33 against public entities and public employees.

34 (x) Any hospital authority created pursuant to this section shall  
35 be bound by the terms of the memorandum of understanding  
36 executed by and between the county and health care and  
37 management employee organizations that is in effect as of the date  
38 this legislation becomes operative in the county. Upon the  
39 expiration of the memorandum of understanding, the hospital  
40 authority shall have sole authority to negotiate subsequent

1 memorandums of understanding with appropriate employee  
2 organizations. Subsequent memorandums of understanding shall  
3 be approved by the hospital authority.

4 (y) The hospital authority created pursuant to this section may  
5 borrow from the county and the county may lend the hospital  
6 authority funds or issue revenue anticipation notes to obtain those  
7 funds necessary to operate the medical center and otherwise provide  
8 medical services.

9 (z) The hospital authority shall be subject to state and federal  
10 taxation laws that are applicable to counties generally.

11 (aa) The hospital authority, the county, or both, may engage in  
12 marketing, advertising, and promotion of the medical and health  
13 care services made available to the community at the medical  
14 center.

15 (bb) The hospital authority shall not be a “person” subject to  
16 suit under the Cartwright Act (Chapter 2 (commencing with Section  
17 16700) of Part 2 of Division 7 of the Business and Professions  
18 Code).

19 (cc) Notwithstanding Article 4.7 (commencing with Section  
20 1125) of Chapter 1 of Division 4 of Title 1 of the Government  
21 Code related to incompatible activities, no member of the hospital  
22 authority administrative staff shall be considered to be engaged in  
23 activities inconsistent and incompatible with his or her duties as  
24 a result of employment or affiliation with the county.

25 (dd) (1) The hospital authority may use a computerized  
26 management information system in connection with the  
27 administration of the medical center.

28 (2) Information maintained in the management information  
29 system or in other filing and records maintenance systems that is  
30 confidential and protected by law shall not be disclosed except as  
31 provided by law.

32 (3) The records of the hospital authority, whether paper records,  
33 records maintained in the management information system, or  
34 records in any other form, that relate to trade secrets or to payment  
35 rates or the determination thereof, or which relate to contract  
36 negotiations with providers of health care, shall not be subject to  
37 disclosure pursuant to the California Public Records Act (Chapter  
38 5 (commencing with Section 6250) of Division 7 of Title 1 of the  
39 Government Code). The transmission of the records, or the  
40 information contained therein in an alternative form, to the board

1 of supervisors shall not constitute a waiver of exemption from  
2 disclosure, and the records and information once transmitted shall  
3 be subject to this same exemption. The information, if compelled  
4 pursuant to an order of a court of competent jurisdiction or  
5 administrative body in a manner permitted by law, shall be limited  
6 to in-camera review, which, at the discretion of the court, may  
7 include the parties to the proceeding, and shall not be made a part  
8 of the court file unless sealed.

9 (ee) (1) Notwithstanding any other law, the governing board  
10 may order that a meeting held solely for the purpose of discussion  
11 or taking action on hospital authority trade secrets, as defined in  
12 subdivision (d) of Section 3426.1 of the Civil Code, shall be held  
13 in closed session. The requirements of making a public report of  
14 actions taken in closed session and the vote or abstention of every  
15 member present may be limited to a brief general description  
16 devoid of the information constituting the trade secret.

17 (2) The governing board may delete the portion or portions  
18 containing trade secrets from any documents that were finally  
19 approved in the closed session that are provided to persons who  
20 have made the timely or standing request.

21 (3) Nothing in this section shall be construed as preventing the  
22 governing board from meeting in closed session as otherwise  
23 provided by law.

24 (ff) Open sessions of the hospital authority shall constitute  
25 official proceedings authorized by law within the meaning of  
26 Section 47 of the Civil Code. The privileges set forth in that section  
27 with respect to official proceedings shall apply to open sessions  
28 of the hospital authority.

29 (gg) The hospital authority shall be a public agency for purposes  
30 of eligibility with respect to grants and other funding and loan  
31 guarantee programs. Contributions to the hospital authority shall  
32 be tax deductible to the extent permitted by state and federal law.  
33 Nonproprietary income of the hospital authority shall be exempt  
34 from state income taxation.

35 (hh) Contracts by and between the hospital authority and the  
36 state and contracts by and between the hospital authority and  
37 providers of health care, goods, or services may be let on a nonbid  
38 basis and shall be exempt from Chapter 2 (commencing with  
39 Section 10290) of Part 2 of Division 2 of the Public Contract Code.

1 (ii) (1) Provisions of the Evidence Code, the Government Code,  
2 including the Public Records Act (Chapter 5 (commencing with  
3 Section 6250) of Division 7 of Title 1 of the Government Code),  
4 the Civil Code, the Business and Professions Code, and other  
5 applicable law pertaining to the confidentiality of peer review  
6 activities of peer review bodies shall apply to the peer review  
7 activities of the hospital authority. Peer review proceedings shall  
8 constitute an official proceeding authorized by law within the  
9 meaning of Section 47 of the Civil Code and those privileges set  
10 forth in that section with respect to official proceedings shall apply  
11 to peer review proceedings of the hospital authority. If the hospital  
12 authority is required by law or contractual obligation to submit to  
13 the state or federal government peer review information or  
14 information relevant to the credentialing of a participating provider,  
15 that submission shall not constitute a waiver of confidentiality.  
16 The laws pertaining to the confidentiality of peer review activities  
17 shall be together construed as extending, to the extent permitted  
18 by law, the maximum degree of protection of confidentiality.

19 (2) Notwithstanding any other law, Section 1461 shall apply to  
20 hearings on the reports of hospital medical audit or quality  
21 assurance committees.

22 (jj) The hospital authority shall carry general liability insurance  
23 to the extent sufficient to cover its activities.

24 (kk) In the event the board of supervisors determines that the  
25 hospital authority should no longer function for the purposes as  
26 set forth in this chapter, the board of supervisors may, by ordinance,  
27 terminate the activities of the hospital authority and expire the  
28 hospital authority as an entity.

29 (ll) A hospital authority which is created pursuant to this section  
30 but which does not obtain the administration, management, and  
31 control of the medical center or which has those duties and  
32 responsibilities revoked by the board of supervisors shall not be  
33 empowered with the powers enumerated in this section.

34 (mm) (1) The county shall establish baseline data reporting  
35 requirements for the medical center consistent with the Medically  
36 Indigent Health Care Reporting System (MICRS) program  
37 established pursuant to Section 16910 of the Welfare and  
38 Institutions Code and shall collect that data for at least one year  
39 prior to the final transfer of the medical center to the hospital

1 authority established pursuant to this chapter. The baseline data  
2 shall include, but not be limited to, all of the following:

- 3 (A) Inpatient days by facility by quarter.
- 4 (B) Outpatient visits by facility by quarter.
- 5 (C) Emergency room visits by facility by quarter.
- 6 (D) Number of unduplicated users receiving services within the  
7 medical center.

8 (2) Upon transfer of the medical center, the county shall  
9 establish baseline data reporting requirements for each of the  
10 medical center inpatient facilities consistent with data reporting  
11 requirements of the Office of Statewide Health Planning and  
12 Development, including, but not limited to, monthly average daily  
13 census by facility for all of the following:

- 14 (A) Acute care, excluding newborns.
- 15 (B) Newborns.
- 16 (C) Skilled nursing facility, in a distinct part.

17 (3) From the date of transfer of the medical center to the hospital  
18 authority, the hospital authority shall provide the county with  
19 quarterly reports specified in paragraphs (1) and (2) and any other  
20 data required by the county. The county, in consultation with health  
21 care consumer groups, shall develop other data requirements that  
22 shall include, at a minimum, reasonable measurements of the  
23 changes in medical care for the indigent population of Alameda  
24 County that result from the transfer of the administration,  
25 management, and control of the medical center from the county  
26 to the hospital authority.

27 (nn) A hospital authority established pursuant to this section  
28 shall comply with the requirements of Sections 53260 and 53261  
29 of the Government Code.

30 SEC. 2. The Legislature finds and declares that a special law  
31 is necessary and that a general law cannot be made applicable  
32 within the meaning of Section 16 of Article IV of the California  
33 Constitution because of the unique needs faced by Alameda County  
34 with respect to the operation and administration of Alameda County  
35 Medical Center.